have been advised, Dr. Roper recommending the gradual dilatation of the parts affected, by means of metallic sounds.

Dr. WYNN WILLIAMS preferred to rely upon the insertion of the vulcanite stem, supported on an India-rubber shield, the latter being made of thin rubber stretched across a small modified Hodge pessary, and perforated with holes. He had treated between sixty and seventy cases of anteflexion at the Samaritan Hospital during the last two years, nearly all in this way, without untoward result. "He frequently received letters stating that women had become pregnant after the insertion of the stem and shield."

In a long discussion that followed the reading of Dr. Roper's paper, we find how diverse are the opinions of the profession upon the safety and usefulness of the stem pessary. As the theory upon which the instrument was devised appears to be a correct one, it is to be regretted that it has so often led to dangerous if not fatal results. The non-metallic flexible stems, based upon yielding supports, all of India-rubber, appear to offer the greatest measure of safety, although nothing is absolutely safe that is inserted into the uterus. R. P. H.

ART. XXIX.—*Handbook of Diagnosis and Treatment of Diseases of the Throat and Nasal Cavities.* By CARL SEILER, M.D., Lecturer on Laryngoscopy at the University of Pennsylvania; Chief of the Throat Dispensary at the University Hospital; Curator of the Pathological Society, etc. etc. 12mo. pp 156. Philadelphia: Henry C. Lea, 1879.

THE author of this work disclaims in his preface the intention of writing a book based upon theory, and says that "only points of practical importance have been discussed," and declares that in carrying out this purpose he trusts his book "may be used as a ready book of reference on the subjects of which it treats."

In order to accomplish his objects, he has taken up one-third the space allotted to his entire work in the description of the laryngoscope, the art of laryngoscopy, the laryngeal and rhinoscopic images, etc. etc. In nearly all of these details he agrees with the many classical authors who have written on the subject. In some points of this part of the author's work, in which he separates himself from other writers, we cannot agree with his stated experience. For example, on page 16, he finds the spectacle frame of Semeleder "insecure" and "tiresome;" and for the inspection of the posterior nares (p. 37) "the larger the mirror that can be borne by the patient, the better can the cavity be illuminated."

In the chapter devoted to the instruments accessory to laryngoscopy, etc., he gratuitously affirms that most remedies employed as applications to the mucous membrane of the throat and nasal cavities are used in solution. In our daily practice, as well as in that of many well-known specialists, powders are actually much more frequently used than solutions. In fact we have come to regard their curative properties as more valuable and freer from objections.

The author uses the term "traumatic" on many occasions, and usually, as we believe, incorrectly. It is scarcely proper, it seems to us, to say that inflammations caused by the inhalation of irritant vapors (p. 51) are *traumatic*, or that acute laryngitis, if *traumatic*, may be caused by the inhalation of dust (p. 58).

In advising the use of nitrate of silver as an inhalation from the atomizer, we would like some mention to be made in regard to the utility of a face protector. Again, it is an error to affirm that local applications of solid nitrate of silver to chronically inflamed tonsils are used with doubtful results, for we know of no more efficient remedy when fused upon an aluminium probe and introduced deeply into the lacunæ of these organs.

The description of acute laryngitis is too concise to be thorough; and, inasmuch as important symptoms, such as stridulous respiration, etc., are not even mentioned, we cannot believe that accurate diagnosis will be aided in great measure by its perusal.

We might go on to the end and find many faults in this little work, which would be far better if sins of *commission* and *omission* were remedied. We do not wish to be severe, but really of what use is such a work? In Reynolds's *System of Medicine* we have quite as good a compendium of the diagnosis and treatment of throat diseases; and in the work of Browne, or Cohen, there is everything and more than is here put down. If special treatises must be written now-a-days in great abundance, let them at least contain novel investigations or plausible theories on debated questions. Let them have here and there a few illustrations which come from the author's own storehouse. The work before us has no special merit other than that it is small and of moderate price. It contains only what is already familiarly known. It errs by making the statement of facts so brief as to omit essential ones; and whenever the beaten track is left, the author's convictions are not narrated in such a way as to require more than very moderate commendation. B. R.

ART. XXX.—*Hygiene of Sight.*

1. *Die Schulhygiene auf der Pariser Weltausstellung*, 1878. Beurtheilt von HERMANN COHN, Dr. med. et philos. a. o. Professor der Augenheilkunde an der Universität zu Breslau. Mit 2 Tafeln Abbildungen. Breslau. Verlag von E. Morgenstern, 1879.
   School Hygiene at the Paris Exhibition of 1878. Critically examined by HERMANN COHN, M.D. et Ph.D., Extraordinary Professor of Ophthalmology at the University of Breslau.
2. *School Life in its Influence on Sight and Figure.* Two Lectures by R. LIEBREICH, Consulting Ophthalmic Surgeon to St. Thomas's Hospital. London: J. & A. Churchill, 1878.

THE alarming increase of myopia, and especially its prevalence among young people of both sexes in city schools, must have caused many observant biologists to speculate as to the exact mechanism by which the unfavourable influences of our present civilization were at work, so as to bring about this rapid deterioration of the visual organs in the last few generations of mankind. These observations of Prof. Cohn, in conjunction with his previous investigations, have done much to explain and point out the means of avoiding this serious degeneration of our most important sense, and the less original lectures of R. Liebreich have been useful in bringing the subject before the English public. Little attention has, however, been paid to the matter in America, and we therefore propose to give our readers a somewhat extended notice of the conclusions to which these two high authorities have arrived.

In a previous essay presented before the Ophthalmological Congress of Heidelberg, in 1865, Prof. Cohn reports that among 10,060 students and pupils of all classes, he found 1004 myopes. All the schools in which he made his investigations included some near-sighted individuals, but in the village schools these unfortunates were found in the proportion of only 1.4 per cent., whilst in city schools 11.4 in every hundred were affected with myopia. Furthermore, in the